

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	lw	68904	9/14/00
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	LL	811	10/13/00
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions  
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